## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS

Date Received
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FAIR POOVER PAGE PRACTICES COMMISSION CITY OF ENGINEES: CITY CLERK

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2011 JAN 20 AM 10: 19 Please type or print in ink. NAME OF FILER (LAST) (MIDDLE) James Bond 1. Office, Agency, or Court Agency Name City Council Member City of Encinitas Division, Board, Department, District, if applicable Your Position ▶ If filing for multiple positions, list below or on an attachment. Position: \_ 2. Jurisdiction of Office (Check at least one box) State ☐ Judge (Statewide Jurisdiction) Multi-County \_ County of \_\_ Encinitas City of \_ Other \_\_ 3. Type of Statement (Check at least one box) X Annual: The period covered is January 1, 2010, through December 31, Leaving Office: Date Left \_\_\_ 2010. (Check one) The period covered is 01 / 012010 through December 31. O The period covered is January 1, 2010, through the date of leaving office. 2010. O The period covered is \_\_\_\_\_\_\_, through the date Assuming Office: Date \_\_\_\_\_/\_\_ of leaving office. Candidate: Election Year \_\_\_ Office sought, if different than Part 1: \_ 4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page: \_ Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached ☐ Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule I certify under penalty of perjury under the laws of the State of California that January 19, 2011 Date Signed \_ Signatur (month, day, year)

## SCHEDULE D Income - Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

James Bond

► NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ► NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE . ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)